#### FILED

ASHEVILLE, N.C.

# United States District Court for the

JUN 232021

Weslern District of North Carolina

U.S. DISTRICT COURT W, DIST. OF N.C.

Asheville Division

111 - 4 1 - 14		· · · · · · · · · · · · · · · · · · ·
HEATHER	IKATHLEEN	<b>ペ</b> テリ ハハ

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

BRANDON R. PADGETT - TROOPER

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.	1:21	CV	146	
	(to be filled	d in by the	Clerk's Office)	
•		)		

Jury Trial: (check one) Yes No

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Non-Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

Page 1 of 6

## I. The Parties to This Complaint

#### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name
Address

Heather IK. (GUNN

139 Lakey Cneek Road

Franklin NL 28734

City State Zip Code

County

Telephone Number

(828) 506: 5522

E-Mail Address

hkgunn@yahoo,com

# B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1		
Name	Brandon R. Padgett	
Job or Title (if known)	North Carolina State Highway Patrol Troo	_ ₽.€
Address	Bryson City NC 28713	<b></b>
	(Graham City onnt) State Zip Code	—
County	Trooper works in MACON COUNTY NC	
Telephone Number	(828) 488.2184	
E-Mail Address (if known)		
	Individual capacity Official capacity	
Defendant No. 2	Ψ.	
Name		
Job or Title (if known)		_
Address		
	City State Zip Code	_
County	•	
Telephone Number		_
E-Mail Address (if known)		
	Individual capacity Official capacity	_

Page 3 of 6

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed.

#### III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- Where did the events giving rise to your claim(s) occur? In Macon County, NC. A. Events originally occured on NC 28 (Bryson City Road)

  Just North East as the Cowee Cherokee Indian Mound

  near SR1355 (Carl Borrels, Road) approximately milepost 33

  across from Van Carter Road - (whene there hade loven several accidents

  - in part due to run-off from Van Carter Road that the NC DOT resuses to six This is irresponsible of the NED OT and Should be fixed Sie Noone else is Hurt.

  What date and approximate time did the events giving rise to your claim(s) occur? В.
  - June 23, 2018 Starting-Approximately at 6:50 PM
- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened to you? Who did what?

  Was anyone else involved? Who else saw what happened?)

  To Start With! The Trooper threm face-down on the side of the road - Un-neccessarily, senselessly, un prosessionally, in competently, Un-gasonably, + BRUTHLLY.

  I sufferied a whack eye, scrayer bruises that? concussion: (See TV, Injuries etc) at the cruel hand lost trooper brandon Padatt

  After the trooper handcuffed me, while the sounded to me, back priming who to the ground, for the trooper broke his knee sadistically who my back priming who to the ground, for nearly 15 minutes, while he pounded the parameter the my already injuried face to nearly 15 minutes, while he pounded the parameter the my already injuried face to while I begged for help + relief from the terrorizing pain + that he insticted upon ragically, minutes be force the trooper brutally attacked me, some one had just ran any goon estimates a painteristive that narrowly survived a near fatal crash. I had just suffered a quite visible head injury + concession + other injuries.

  a quite visible head injury + concession + other injuries.

  a quite visible head injury + concession + other injuries.

  The trooper LIED many, many times in his reports that I had not been injuried in the wreck thus he had concident to the page 406 of the trooper LIED many, many times in his reports concerning details is the whole ancident.

  The Trooper LIED many, many times in his reports concerning details is the whole ancident.

  Brand on Padgett should Not Ble ATDOOPER. (There is more to Be Told ...)

  Case 1:21-cv-00166-MOC-WCM Document 1 Filed 06/23/21 Page 4 of 6 Was anyone else involved? Who else saw what happened?)

Case 1:21-cv-00166-MOC-WCM

#### IV. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive. The Injuries I sustained from the Trouper's Include but are not limited to: Unneccessam Duress Black Eyl Cuts + Scrapes on Face + Body Bruises - Cheek Swelling 7" CONEUSSION Treatment received: Gaute Bandage Son Head by Vol. Fire Reptonger Bulging Disk (L4-L5-) Small Glassos I ig water of Paper Tomel
given Kindy by Female Detertion
NO ICE was Ever offend by Licensed Em - Sciatica Nerve Damage Numbre sép Loss of visibn + Hearing (Faith + Trust etc) (BASIL) Or VOL. FIRE DEPT OF TROUPER Thank received many Honks

of Therapy Con acticonsed Physical Therapists

multiple Ticensed Councilor Therapists

tawphysicians Assistant V. Relief State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims. First and Forenost: I want the court to Order the Troopers "Personnel File To BEOPENED, - The Trooper Must Be Held Accountable + Seriously Discipline de In the Bost Interest & our Community I would like The Court to Use All + Whatever Authority I that to Order that the Trooper Be psychology ally, mentally Interhally Evaluated + Ordered to Receive Sensitivity Training, Anger Manage ment Training (Iplus whatever Other Training), Evaluations, Counseling the Court has Anthonis To Deem Appropriate, ALSO: I would like the Court to Use All + whatever Anhority It has to see to it that there is a Sorions+ Thorough Investigation into the Trooper's Improper Behavior;

The Trooper's Improper Behavior; this TROOPER should Ultimately BE FIRED or affect Forced to Resign So that the Trooper Wever has the Official Authority to Ever Harm Another Person Ever Again, Then JUSTICE would be Partially Served. ALSO-I AM SEEKING: Monetary Componsation. The Money Jamages, hat I am seeking include, 6 nt and not limited to):

My Possible Future Atlowney fees.

I am Also seeking Any Punitive Damages the Court, in it's wisdom,

Deems Appropriate. Ultimately, I want the court to Enforce my CIVIL RIGHTS \* please Helpme to restore some of my Inearly complete 1055 in Thy Trust + TAITH in the Law Ensorment system + our Justice System. Thank You For Your Time + Consideration

Document 1 Filed 06/23/21 Page 5 of 6

## VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

#### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing: $6/2$	3/21		
	Signature of Plaintiff Printed Name of Plaintiff	Heather K. G	IV NN	
В.	For Attorneys	·		
	Date of signing:	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number	- NAP PROFITATIONAL		
	Name of Law Firm	- ACCUPATION		
	Address		TO COMPANY AND ADDRESS OF THE STATE OF THE S	- Popular a alvar
		City	State	Zip Code
	Telephone Number			
	E-mail Address			